



Original Research Paper

Analysis of Legal Responsibility for Forged Informed Consent in Emergency Medical Procedures: A Comparative Study of Indonesian Court Verdicts

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Abstract

Background: Informed consent is a core ethical and legal principle in healthcare to safeguard patient autonomy. In emergencies, when consent cannot be obtained, legal limits for physicians become uncertain. An Indonesian case involving forged consent for an emergency caesarean section produced conflicting judgments between the District Court and the Supreme Court. **Objective:** This study analyzes regulation of informed consent in emergencies under Indonesian Law No. 17 of 2023 and compares legal reasoning of the Manado District Court and the Supreme Court. **Methods:** A normative legal research design was applied using comparative analysis of legal documents. Primary sources included Law No. 17 of 2023 on Health, the Indonesian Criminal Code, the Manado District Court verdict No. 90/PID.B/2011/PN.MDO, and the Supreme Court decision No. 365 K/PID/2012. Data were collected through literature review. **Results:** The District Court acquitted defendants by prioritizing the emergency context. Conversely, the Supreme Court convicted them, stressing criminal forgery and medical negligence contributing to patient death, supported by forensic evidence. **Conclusion:** The Supreme Court clarified that emergencies do not eliminate criminal liability for procedural violations such as forged consent. This decision reinforces obligations of healthcare professionals to comply with ethical and legal documentation standards during emergency care.

Keywords: Informed Consent; Medical Emergency; Legal Responsibility; Medical Negligence; Forgery; Court Verdict.

Introduction

Informed consent is a cornerstone of modern medical ethics and law, embodying the principles of patient autonomy and the right to self-determination¹. It transforms the paternalistic model of medicine into a partnership based on trust, information, and voluntary agreement². Legally and ethically, valid consent requires three core elements: the provision of comprehensive information about the proposed procedure, including its risks and benefits; the patient's voluntary decision without coercion; and the patient's capacity to make that decision³. In routine practice, this process is straightforward. However, in

emergency medical situations where a patient is incapacitated and unable to provide consent, healthcare providers must navigate a complex ethical and legal landscape, balancing the imperative to save life with the obligation to respect patient rights⁴.

The problem of informed consent in emergencies is a global challenge, with legal systems worldwide striving to define the permissible scope of action for clinicians⁵. In Indonesia, this issue is governed by Law No. 17 of 2023 concerning Health, which stipulates that in life-threatening emergencies, medical procedures may be performed without prior consent⁶. This provision is intended to

empower doctors to act decisively. However, the law also mandates that the procedure and its reasons must be explained to the patient or their family once the patient regains consciousness or the family is located⁶. The ambiguity arises in the practical application: what constitutes a true emergency, and what are the legal consequences when procedures are performed without proper documentation or, worse, with falsified documentation?

Previous research has highlighted that deviations from established medical and legal protocols in emergencies are not uncommon and can lead to malpractice litigation^{7,8}. Studies have often focused on the clinical aspects of care or the general principles of medical error. However, a significant research gap exists in understanding the judicial interpretation of these cases, particularly when there is a conflict between the clinical justification of an emergency and a clear procedural violation, such as document forgery. The case of *Siska Makatey v. Dr. Dewa Ayu Sasiary Prawani, et al.* is a landmark example that exposes this tension. The conflicting verdicts from the Manado District Court and the Supreme Court created profound uncertainty for medical practitioners regarding their legal protection when acting in good faith during an emergency.

The urgency and novelty of this research stem from its direct analysis of this legal dichotomy. While the District Court's verdict seemed to prioritize the clinical context (the emergency), the Supreme Court's reversal prioritized legal procedural integrity and the criminal act of forgery. This study is novel because it provides a comparative juridical analysis of these two high-profile verdicts to dissect the legal reasoning behind their conflicting outcomes. This analysis is crucial for providing clarity and legal certainty for medical professionals, hospital management, and legal scholars in Indonesia.

This study is guided by the main research question: How did the Manado District Court and the Supreme Court arrive at different verdicts in the case of forged informed consent for an emergency caesarean section, and what are the implications of the Supreme Court's final decision? The objectives are: 1) To explain the legal regulation of informed consent in emergency situations based on Law No. 17 of 2023. 2) To analyze and compare the legal considerations and evidence presented in the verdicts of the Manado District Court and the Supreme Court. 3) To determine the legal responsibility of medical personnel who forge informed consent in an effort to save a patient's life.

The findings of this study have significant implications. For the medical community, it offers a critical lesson on the limits of the "emergency" defense and the non-negotiable importance of ethical and legal documentation. For hospital policymakers, it highlights the need for robust Standard Operating Procedures (SOPs) that guide staff on documentation during and after emergencies. For the legal system, it reinforces the supremacy of procedural justice and evidence in medical malpractice cases. Academically, this case serves as a vital reference point for the discourse on medical law, ethics, and the balance between clinical beneficence and legal accountability in Indonesia and other jurisdictions with similar legal frameworks⁹.

Materials and Methods

Study Design

This research utilizes a normative legal study design, also known as doctrinal legal research. This approach focuses exclusively on written legal sources to analyze and explain legal phenomena¹⁰. The design is appropriate for this study as it aims to systematically interpret legal regulations and court verdicts to understand the legal principles governing informed consent in

emergencies and the concept of criminal liability for medical negligence and forgery. The analytical framework is built upon principles of statutory interpretation and case law analysis.

Sample

The "sample" in this normative study consists of primary and secondary legal materials. The primary legal materials are the core objects of analysis and include: (1) Law No. 17 of 2023 on Health (Undang-Undang Kesehatan); (2) Law No. 1 of 2023 on the Criminal Code (Kitab Undang-Undang Hukum Pidana); (3) The verdict of the Manado District Court (Case No. 90/PID.B/2011/PN.MDO); and (4) The reversal verdict of the Supreme Court of the Republic of Indonesia (Case No. 365 K/PID/2012). Secondary legal materials provide context and support for the analysis, including legal textbooks, academic journals, articles on medical ethics and law, and scholarly commentaries on the case.

Data Collection Technique

Data were collected through a systematic literature review of the identified legal materials. The process involved locating the full text of the laws and court verdicts from official government and Supreme Court websites. Secondary materials were sourced from legal databases, academic journals, and scholarly libraries. The collection was aimed at gathering all relevant legal provisions, judicial arguments, evidence presented, and legal opinions pertaining to informed consent, emergency medical procedures, and the crime of forgery as defined in the Indonesian legal system.

Data Analysis Technique

The collected data were analyzed using a qualitative juridical method. This involved several steps: (1) Textual Analysis: A careful

reading and interpretation of the legal texts (laws and verdicts) to understand their literal meaning and intent. (2) Comparative Analysis: A systematic juxtaposition of the Manado District Court's verdict with the Supreme Court's verdict to identify similarities, differences, and, most importantly, the evolution of legal reasoning. (3) Synthesis: The findings from the analysis were synthesized to construct a coherent argument explaining the legal basis for the differing verdicts and to draw conclusions about the state of Indonesian law on this matter. The analysis focused on identifying the key legal issues, the application of legal principles, and the weight given to different pieces of evidence, such as the forensic report on the signature.

Ethical Consideration

This study is a normative legal research that analyzes publicly available legal documents and does not involve direct interaction with human subjects as participants in empirical research. Therefore, it did not require ethical clearance from an Institutional Review Board (IRB). However, the research was conducted in strict adherence to academic and legal ethics. This included the accurate citation of all sources, the objective and non-partisan analysis of legal materials, and the avoidance of any misrepresentation of the legal facts or arguments presented in the primary sources¹¹. The principle of fulfilling the rights of individuals, including the right to health and proper legal procedure, was a central consideration, reflecting the broader justice context in which such cases occur¹².

Results

The primary findings of this study are derived from the comparative analysis of the two court verdicts. The core of the legal conflict lies in the interpretation of the facts and the application of the law by two different levels of

the judiciary. The Manado District Court and the Supreme Court reached opposite conclusions based on their respective legal

reasoning. A summary of the key findings from each verdict is presented in Table 1.

Table 1. Comparative Analysis of Manado District Court and Supreme Court Verdicts

Aspect	Manado District Court Verdict (No. 90/PID.B/2011/PN.MDO)	Supreme Court Verdict (No. 365 K/PID/2012)
View of Emergency	Prioritized the emergency context. The C-section was deemed a life-saving (CITO) procedure, thus negating criminal liability.	Acknowledged the emergency but held it does not nullify the requirement for procedural legality and ethical conduct.
View of Forgery	Did not consider the forged signature a criminal act in the context of saving a life.	Considered the forged signature a criminal act (<i>spurious signature</i>) based on forensic evidence, violating Article 263 of the Criminal Code.
Key Evidence	Focused on clinical testimony and the emergency nature of the situation.	Heavily relied on the forensic laboratory report confirming the signature was forged, and the <i>Visum et Repertum</i> indicating death due to air embolism resulting from negligence.
Application of Law	Applied the principle of "the health of my patient will be my first consideration," interpreting it as a shield from liability in emergencies.	Applied Articles 359 (negligence causing death) and 263 (forgery) of the Criminal Code concurrently, emphasizing that good intentions do not excuse criminal acts.
Final Verdict	Acquitted (<i>vrijspraak</i>) all three defendants of all charges.	Overtaken the lower court's decision. Found all three defendants guilty and sentenced them to 10 months in prison.
Core Reasoning	The doctors acted in good faith to save the patient's life; medical negligence could not be proven.	The doctors committed negligence leading to death and compounded it by forging a document to cover their actions, a clear violation of law and ethics.

Source: Synthesized from court verdict documents, 2025

The analysis reveals a fundamental divergence in judicial philosophy. The District Court adopted a clinical-centric view, where the urgency of the medical situation appeared to outweigh procedural lapses. In contrast, the Supreme Court adopted a strictly legalistic view, asserting that no circumstance, including an emergency, justifies the commission of a criminal act like forgery. The Supreme Court's decision placed significant weight on objective, forensic evidence (the forged signature and the *Visum et Repertum*) over the subjective intent of the doctors to save a life. This verdict establishes a clear legal precedent: the "emergency" exception is a defense for acting *without* consent, but not for acting *with falsified* consent or for negligent actions that cause harm.

Discussion

The findings of this study highlight a critical tension in medical law between clinical beneficence and legal justice. The District Court's initial acquittal reflects a common judicial empathy towards medical professionals making difficult decisions under pressure¹³⁻¹⁵. However, the Supreme Court's reversal is a powerful affirmation of the principle that legal and ethical standards are absolute, not conditional^{16,17}. The court's reasoning implies that while doctors are empowered to act in emergencies to save lives, this power is not a license to abandon procedural integrity. The act of forging the patient's signature was not seen as a benign administrative error but as a deliberate act to create a false legal record, which fundamentally undermined the trust inherent in the doctor-patient relationship and

the legal system. The Supreme Court effectively ruled that the end (saving a life) does not justify the illegal means (forgery and negligence).

This case aligns with global discourse on medical error and disclosure. Studies in medical ethics increasingly argue for a culture of transparency and full disclosure of medical errors, as hiding mistakes through falsified documentation can destroy trust and lead to greater legal consequences than the error itself¹⁸⁻²⁰. The Supreme Court's decision is consistent with this trend, punishing the cover-up more severely than the initial clinical misjudgment. In the United States, similar cases of informed consent violations or documentation fraud can lead to severe penalties, including license revocation and criminal charges, especially when negligence is involved²¹⁻²³. This Indonesian verdict thus brings its legal system in line with international standards that prioritize patient autonomy and legal accountability, even in complex clinical scenarios. The emphasis on forensic evidence also mirrors the increasing role of objective scientific evidence in medical jurisprudence worldwide^{24,25}.

The implications of this verdict for clinical practice in Indonesia are profound. It serves as a stark warning that documentation is not merely an administrative task but a critical legal and ethical component of patient care. Hospitals must immediately review and reinforce their SOPs for emergency care, ensuring they include clear protocols for post-event documentation and communication with family²⁶⁻²⁸. Training programs for medical and nursing staff must emphasize the legal boundaries of the "emergency" clause and the severe consequences of documentation fraud. This case also has public health implications. By upholding patient rights through a strict legal interpretation, the Supreme Court's decision can bolster public trust in the

healthcare system. It assures the public that the legal system will hold providers accountable, which is essential for a functioning therapeutic relationship^{29,30}. This aligns with the broader principle that all individuals, including vulnerable populations like prisoners, have a right to health that is provided with dignity and respect for legal procedures³¹⁻³³.

The primary strength of this study is its in-depth, primary-source analysis of a landmark and legally complex case. By comparing the two verdicts, it provides a unique insight into the evolution of judicial thought on a critical issue. The use of a comparative legal analysis allows for a clear and structured explanation of the conflicting decisions. However, the study has limitations. As a qualitative analysis of a single case, its findings are not statistically generalizable. The analysis is confined to the Indonesian legal context and may not be directly applicable to other jurisdictions with different legal traditions. Furthermore, the study is based solely on the written verdicts and does not include interviews with the judges, lawyers, or doctors involved, which could have provided additional perspectives on the case.

Future research should build upon this study in several ways. First, a broader review of Indonesian medical malpractice verdicts involving emergency care could identify whether this Supreme Court decision has set a clear and consistent precedent. Second, empirical research involving surveys and interviews with Indonesian doctors and nurses would be valuable to understand their awareness of this case and its impact on their clinical practice and documentation habits. Third, a comparative legal study analyzing how emergency consent and medical negligence are handled in other Southeast Asian countries could provide valuable regional insights. Finally, research could explore the development and effectiveness of hospital-based training programs designed to prevent

similar incidents by improving legal literacy and ethical decision-making among healthcare professionals.

Conclusion

This study has clarified the legal framework for informed consent in emergency situations in Indonesia and analyzed the conflicting verdicts in the landmark Siska Makatey case. The analysis reveals that while the Manado District Court prioritized the life-saving emergency context, the Supreme Court's final verdict established that an emergency does not provide a legal justification for the forgery of informed consent or for medical negligence. The Supreme Court's decision is a pivotal moment in Indonesian medical law, affirming that legal and ethical standards, particularly the prohibition against forgery, are absolute. It underscores that the fulfillment of patient rights, including the right to honest and accurate documentation, is a non-negotiable aspect of healthcare, even in the most challenging circumstances. This ruling provides crucial legal certainty and serves as a critical reminder for all medical professionals to uphold the highest standards of legal and ethical conduct at all times.

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Conflict of Interest Statement

The author(s) declare no commercial, financial, or personal conflicts of interest related to this research. All authors approved the final manuscript and consented to its publication in *Healthy Tadulako Journal*.

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